

**CERTIFICATION OF DEBTOR
REGARDING MONTHLY REPORT**

Debtor: Edith Mary Chew
Chapter 13 Case No.: 20-12591

I, Edith M Chew, declare under penalty of perjury that the following information is true and correct:

1. I am the business debtor in the above referenced matter.
2. I have completed and attached a Monthly Financial Report for the month of March, 2021
3. All of the information in the Monthly Financial Report is complete, true and correct to the best of my knowledge, information and belief.

Date: 4/2/21


Debtor

***YOU ARE REQUIRED TO COMPLETE A MONTHLY FINANCIAL REPORT FOR FIRST MONTH YOU FILED FOR BANKRUPTCY AND RETURN IT IMMEDIATELY WITH THE OTHER ATTACHED PAPERWORK.**

**** YOU ARE ALSO REQUIRED TO FILL OUT MONTHLY FINANCIAL REPORTS FOR EACH AND EVERY MONTH AFTER YOU FILED YOUR PETITION UNTIL YOUR PLAN IS CONFIRMED BY THE COURT. PLEASE MAKE PHOTOCOPIES OF THE ATTACHED MONTHLY FINANCIAL REPORT FORM, AS NEEDED.**

***** FAILURE TO PROVIDE THE MONTHLY FINANCIAL REPORTS AS STATED ABOVE WILL HOLD UP THE CONFIRMATION OF YOUR CASE AND POSSIBLY CAUSE YOUR CASE TO BE DISMISSED.**

MONTHLY FINANCIAL REPORT OF BUSINESS OPERATIONS

Debtor Name: Edith H. Chew
Case No: 20-12591
Business Name: Law Office of Edith H. Chew
For the Month & Year (1/05, etc): March 2021

BUSINESS INCOME:

(1)	Actual Income from Sales & Service	\$	<u>0</u>
(2)	Other (Specify) <u>unemployment</u>	\$	<u>3140.00</u>
(3)	Other (Specify) <u>SS</u>	\$	<u>1945.00</u>
(4)	Total Actual Income (1+2+3)	\$	<u>3085.00</u>

ACTUAL BUSINESS EXPENSE PAID

(5)	Rent/Lease	\$	<u>700.00</u>
(6)	Utilities (Electricity, Gas, Water & Sewer)	\$	
(7)	Telephone	\$	<u>240.00</u>
(8)	Insurance	\$	
(9)	Wages for Employees	\$	
(10)	Wages for Self/Owner(s)	\$	
(11)	Taxes	\$	
(12)	Gas and Fuel for Business Vehicles	\$	<u>93.00</u>
(13)	Other (Specify) <u>Health Insur</u>	\$	<u>195.84</u>
(14)	Other (Specify) <u>Monthly Fees</u>	\$	<u>75.00</u>
(15)	Other (Specify)	\$	
(16)	Total Actual Business Expenses Paid Or	\$	<u>1264</u>
	(sum of 5 through 16)		

(17)	Net Business Income/Loss (line 4-Line 16)	\$	
(18)	Net Wages From Regular Employment-De	\$	
(19)	Net Wages From Regular Employment-Sp	\$	
(20)	Amount Carried Over From Last Month	\$	
(21)	Total Net Monthly Income (sum of 17 thr	\$	

PERSONAL

(22)	Rent/Mortgage	\$	<u>1734.00</u>
(23)	Utilities (gas, electric, water, sewer, fuel)	\$	
(24)	Telephone	\$	
(25)	Food	\$	
(26)	Transportation (fuel, tolls, parking)	\$	
(27)	Other (specify) <u>Care</u>	\$	<u>500.00</u>
(28)	Other (specify) <u>Insurance</u>	\$	<u>262.54</u>
(29)	Other (specify) <u>Clothes</u>	\$	<u>277.00</u>
(30)	Other (specify) <u>misc</u>	\$	<u>100.00</u>
(31)	Other (specify) <u>Loan</u>	\$	<u>530.00</u>
(32)	Total Actual Personal Expenses Paid (22	\$	<u>4785</u>

NET INCOME (LOSS)

(33)	Gross Excess Income (line 21 - line 32)	\$	<u>300.00</u>
(34)	MONTHLY CHAPTER 13 PLAN PAYMENTS	\$	<u>90.00</u>
(35)	Net Excess Income (line 33 - line 34)	\$	
	carry amount on line 35 to next month line 20		

EXHIBIT D